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Meaningful Pattern Recognition and Leadership

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Meaningful Pattern Recognition and Leadership

Quinn Bissonette

Submitted in partial fulfillment of the
requirement for the degree of
Master of Arts in Nursing

AUGSBURG COLLEGE
MINNEAPOLIS, MINNESOTA

2012

**Augsburg College
Department of Nursing
Master of Arts in Nursing Program
Thesis or Graduate Project Approval Form**

This is to certify that **Quinten Bissonette** has successfully defended his Graduate Project entitled "**Meaningful Pattern Recognition and Leadership**" and fulfilled the requirements for the Master of Arts in Nursing degree.

Date of Oral defense June 18, 2012.

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Abstract

Leadership is more impactful and inspiring when leaders authentically engage individuals. Insights from research support leadership authenticity, transformational leadership, and the importance of meaningful recognition. Nursing theory and caring science value the worth of recognition. A conceptual model combining nursing theory with leadership theory creates a stimulating practice model to generate successful transformational leadership and promote self actualization. The use of Newman's (2008) nursing theory of health as an expanding consciousness, in this conceptual model, validates the role of nursing in leadership and the unique contributions it can afford to leadership application.

Keywords: meaningful recognition, Margaret Newman, transformational leadership

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CHAPTER ONE: Introduction

In 2005, the American Association of Critical Care Nurses (AACN) published an article suggesting that the nursing profession adopt a set of standards for establishing and sustaining healthy work environments (Clevenger et al., 2005). The article focused on nurses assuming a collaborative approach to implement six proposed standards to establish and maintain a healthy work environment: skilled communication, true collaboration, effective decision making, appropriate staffing, meaningful recognition, and authentic leadership (Clevenger et al., 2005). As the AACN suggests, transformational, authentic leadership is paramount in the current turbulent nursing era. This evolving, revolutionary leadership paradigm cements caring as the preeminent module for leadership. As caring science and nursing evolve, so must the leadership styles and directions which employ them. Transformational, authentic leadership provides the future direction for nursing. Insights from qualitative research, quantitative research, and nursing theory demonstrate the underpinning, practice, and characteristics of transformational leadership. The outcomes of the research and theory suggest transformational leadership is augmented through meaningful recognition; facilitating self actualization and a positive impact on nursing, patient care, and an organization as a whole.

Purpose

Although experience and research support the use of meaningful recognition to promote self actualization, no clear or targeted module design exists for authentic nursing leadership to promote self actualization in nursing. The purpose of this project is to develop a meaningful recognition model for authentic nursing leadership to embrace and

promote the self-actualization of nurses at the nursing unit level in a Midwestern academic hospital. Margaret Newman's theory of health as an expanding consciousness (HEC) (2008) will serve as the conceptual framework and foundation for this model.

Significance

There is much disconnect, stress, disloyalty, and insecurity in nursing today. The present time is a turbulent era for nursing. Healthcare today is increasingly becoming driven by consumer perceptions and government regulation; therefore, scores of contemporary expectations must evolve. As the healthcare industry becomes exceedingly regulated, it is essential for nursing leadership to identify unique practices that will be consistent with consumer expectations, while still remaining congruent in providing effective nursing care. Meaningful recognition is relevant for transformational leadership as it can directly reinforce enviable behaviors from nurses consistent with a transformational leader's intentions. Northouse (2010) defines transformational leadership as a process approach that changes and transforms people and is concerned with emotions, values, ethics, standards, and long term goals (p. 171). Transformational leaders assume a visionary or futuristic approach to leadership. They energize individuals to pursue mutual goals, share visions, and embrace an empowering culture, where individual values and mutual respect are fundamental (Murphy, 2005). Transformational leaders strive to create a self actualized workforce: "the level of performance where workers are engaged and willing to give their best efforts to their work, creating mutual benefit for the organization and the individual" (Gostick & Elton, 2007, p. 59).

Transformational leaders support the four defined areas of effective leadership: setting realistic attainable goals, maintaining an environment of trust, endorsing self and team accountability, and practicing effective communication (Gostick & Elton, 2007). Transformational leaders who support meaningful recognition can perpetually reinforce the aforementioned areas of effective leadership and behaviors to create that highly desirable self actualized environment; therefore, meaningful recognition is extremely valuable and significant for a transformational leader's success. Meaningful recognition can serve as the conduit to reduce nurses' perceptions of insecurity and heightened stress. It can promote engagement, connectivity, and loyalty within the organization.

The previous statements clearly suggest that meaningful recognition can be exceedingly impactful in transformational nursing leadership. When nurses are engaged, aligned with the organization's intent, given the appropriate direction, and provided apposite meaningful recognition, they can become self actualized. The challenge of nursing leadership is to facilitate and aspire for universal self actualization. The grand problem is that most people, nurses included, prefer different types of recognition; therefore, something one person perceives as meaningful may not be recognized as meaningful to another. How can authentic nursing leaders make recognition itself meaningful for each individual? Is there a model or research to support this notion or can meaningful recognition, within the context of nursing theory, serve as the model? The creation of a model is not an easy task and one that requires a great deal of energy and authenticity, but is vastly worthy of pursuit.

Nursing Theoretical Foundation

The idea of meaningful recognition and the powerful influence it has is not unique to academic research, successful corporate America, or scholarly leadership literature.

Nursing theorist Newman's work has long evoked the impact that recognition, specifically pattern recognition, has on caring science and nursing. Her conceptual framework and grand theory, health as expanding consciousness (HEC), is worth exploring to consider potential leadership utilization and meaningful recognition model design (Tappen, 2011).

Health as Expanding Consciousness

Newman developed her theory of HEC to challenge the view of health as the absence of disease or disability (Newman, 2008). According to Newman, the interaction of disease and wellness are part of the life process and are patterns unique to an individual as one evolves towards an expanded consciousness (Picard & Jones, 2005). They are patterns of the whole. This view enables nurses to let go of preconceived notions and traditional expectations and allows them to see the evolving process of the person. Newman's model incorporates holism and suggests the environment and the individual are part of a unitary pattern and that this pattern is reflected in movement, space, and time patterns of consciousness (Chinn & Kramer, 2008). The expanded consciousness allows one to connect with the completeness, fullness, and wholeness of the universe, therefore affording one a boundless amount of prospective actions and a limitless capacity to love (Picard & Jones, 2005). Newman's model enables one to look beyond disease and illness manifestation and embody the evolving process of the person as a whole. Through pattern recognition, a sense of knowing and a higher level of

consciousness are attained. Upon attainment of this sense of knowing and heightened awareness, caring is transformed into a more inclusive, meaningful type of caring (Newman, 2008).

Newman determined there were two central factors consistent in all nursing theory: health and caring. She suggested these factors are both inexplicably linked as one encompasses the other. She theorized that the combination of health and caring in nursing created caring in the human health experience. This view represented an undivided wholeness and transformation (Newman, 2008).

Pattern recognition. Newman's theory of HEC (2008) is a unitary, evolving theory where pattern is the identifier of wholeness and transformative unfolding is the process of change. The nursing science of the theory of HEC focuses on facilitating the health of the individual and the theoretical intent of practice is to assist in attaining meaning and higher levels of consciousness. Pattern recognition is the first step in understanding Newman's theory. According to Newman, patterns that one may see, hear, or feel, macro or microscopically, show relationships. These patterns are portrayals of the undivided wholeness of the universe. For example, when one cuts his or her skin, the person bleeds. That is a pattern. When one strikes a key on the piano, it creates a certain tone. That is a pattern. When a nurse enters a patient's room and recognizes that a patient is upset about a new diagnosis, he or she has recognized a pattern. A sense of knowing evolves from the recognition of the pattern and although the pattern is unique, it is not a singular occurrence. The pattern is a complex, multifaceted event that exists in variable space and time elements. Patterns are always present, but it is the recognition of patterns that promotes a sense of knowing.

In nursing, recognizing one's own patterns and patient patterns allows one to enter into a broader spectrum of both worlds; therefore, allowing one to unfold into an expanded consciousness. In nursing practice, this then allows patients and nursing to focus on what is most meaningful. Insight is experienced by the nurse and patient and a potential action for choice is revealed.

By recognizing patterns, one is choosing to know, which is a conscious decision and a form of caring. This conscious choice makes a pattern meaningful. If knowing is determined to be a form of caring, caring could be more effective and impactful at higher levels of consciousness. The more patterns one recognizes, the more one knows and because of the heightened sense of knowing, one can more adeptly provide nursing care. Finally then, and at the heart of the Newman's theory, one can deduce that caring and knowing unfold an expanded consciousness which leads to a greater form of caring (Newman, 2008).

Newman supports research taking the form of practice, rather than practice taking the form of research. In nursing, her transformative paradigm of research is not predictive or repeatable research, the research is applicable in the moment and enlightens participants about the potential for action. The research enlightens the process of practice. In this transformative paradigm, research is a mutual process and is an understanding, rather than a predication (Picard & Jones, 2005).

Meaningful Pattern Recognition

The concepts of pattern recognition and the sense of knowing that promotes a higher level of caring, both clearly demonstrate that Newman's theory of pattern recognition is impactful and can create meaningful relationships. A conscientious

exploration of meaningful recognition, transformational leadership, Newman's theory of HEC (2008), and the principle inspirations of all three, uncovers a profound relationship: scholarly leadership concepts of meaningful recognition, at the macroscopic level, are actually pattern recognitions. An exciting, applicable model for transformational leadership and nursing evolves from this discovery. Creating nursing knowledge for an existing, applicable nursing theory (HEC) affords the nursing profession a dynamic option to enhance transformational leadership in nursing.

The combination of meaningful recognition with Newman's (2008) principles of pattern recognition provides an opportunity for leaders to authentically engage nurses. This engagement can create self actualization. If by recognizing individual patterns, one is caring, one can construe that by recognizing those patterns, one is meaningfully engaging people at a higher, unadulterated conscious level. For example, when one observes a nurse effectively de-escalate a conflict between families, one is actually identifying a pattern. When one observes a particular behavior consistent with a nurse's pattern, one recognizes that nurse and the result is a meaningful, authentic engagement. One has appealed to the nurse's higher order needs, their aspirations, and expectations. The promoted engagement and appeal creates an environment of empowerment. This empowerment creates a sense of worth within nurses and they feel that they are being deemed as worthy and recognized when offering their work. A mutual benefit evolves and the nurse moves closer to becoming self actualized. The nurse is now connected through the recognition of the pattern. This combined approach inspires creative, contemporary avenues for successful transformational leadership, organizational alignment, and heightened self awareness.

The concept of meaningful pattern recognition evolves from this information and provides nursing leadership with the rare opportunity to validate the worth of nursing theory and caring science in the context of a transformational leadership paradigm. It also authenticates nursing as a chief contributor to leadership theory. Contemporary viewpoints of nursing theory have criticized at length that nursing theory is not readily applicable to day to day, bedside nursing. Often, nurses and those outside of academia have felt that nursing theory belongs in the classroom and although it serves as a foundation for nursing concepts, nursing theory's application ends when the nursing student's final college essay is submitted.

The chapters that follow will demonstrate how meaningful pattern recognition liberates nursing theory and the nursing profession from the hospitals, clinics, exam rooms, and classrooms. It provides nursing leadership with the rare opportunity to validate the worth of nursing theory in the context of a transformational leadership paradigm. Much literature exists to support the significance of meaningful recognition and transformational leadership, which are principal to meaningful pattern recognition. Exploring the literature on meaningful recognition is important to identify the concepts which support the idea of meaningful pattern recognition and how it can impact self actualization in nursing.

Summary

The hectic nursing era of today requires a paradigm shift in leadership practice to enable nurses at the unit level to become self actualized so that they may give their best efforts to the organization and themselves. Transformational, authentic leadership is one necessary component that contributes to nursing self actualization, but alone is not the

answer. A healthy work environment can be created, fulfilled, and sustained when nurses are recognized by authentic nursing leadership in a meaningful way. The key is determining how to make the recognition meaningful. Newman's work and her theory of HEC (2008) identify some profound ideas related to recognition, specifically pattern recognition, and how pattern recognition impacts relationships. Newman's work combined with transformational leadership theory provokes the notion of meaningful pattern recognition which may well indeed serve as the conduit to promote self actualization in today's nurses. The following chapter will explore this provocative impression.

CHAPTER TWO: Literature Review

A meaningful recognition model could be impactful for not only nurses in formal leadership roles, but could also prove beneficial for nurses in informal leadership roles. Authentic, transformational leadership is not delineated by status, role, or stature. Authentic leadership is a practice opportunity for any nurse, or any individual. It is the way in which an individual leads others regardless of formal position or status. Because authentic leadership is not determined by status, it transcends position or roles. Nurses in any role can lead transformationally to influence behaviors and relationships. Authentic leadership can be applicable to many and utilizing the combined approach of authentic leadership and meaningful recognition could promote self actualization.

Project Background

This meaningful pattern recognition practice model is intended for authentic nursing leadership to theoretically employ at the Mayo Foundation's (Mayo), St. Marys hospital, in Rochester, MN. Specifically, the meaningful pattern recognition model would be hypothetically implemented in a general surgical unit within the hospital. Mayo represents one of the largest, most successful organizations providing healthcare in the world. It is the primary employer of most Rochester citizens and many surrounding communities.

The heart of the Mayo campus is located in downtown Rochester at St. Marys hospital and the Mayo Clinic. St. Marys hospital is the oldest, largest private hospital in the Mayo system. St. Marys hospital is an academic teaching hospital and is saturated with medical and surgical residents, physician fellowship program interns, medical students, nursing students, and a plethora of other individuals and specialties furthering

their education in healthcare. The nursing staff on the general surgical floor is predominately female and is of Caucasian decent. The unit provides healthcare for approximately 1,300 post operative patients on an annual basis. The general surgical unit has 19 private rooms and is staffed with 36 registered nurses who directly report to one nurse manager.

As a nurse, who formerly worked on the general surgical unit at St. Marys hospital, personal experiences and observations have highlighted the need for a change in culture on the unit. There are several components negatively impacting the success of the general surgical unit including a lack effective teamwork, impaired communication, compromised trust, and accountability. There is a need to address these issues and that could be done through the utilization of meaningful recognition. Addressing the aforementioned issues from this creative, meaningful recognition avenue, could enhance the overall performance of the general surgical unit, impact the unit culture, elevate patient care, and promote self actualization among nurses.

Cultural Context

Although the general surgical unit alone holds only one nurse manager position, which is a formal leadership role, there are several staff nurses on the unit practicing authentic leadership that are not in formal leadership positions. One example of this is the preceptor role for staff nurses. The nurse preceptor orients new nurse employees over a 10 week period to the general surgical unit's routines and practices. The nurse preceptor is responsible for teaching and leading the development of the new nurse orientee. The nurse preceptor evaluates the incoming orientee's skills and helps the orientee to build a solid foundation of nursing expertise. They equip the orientee with the

ability to recognize and react competently to difficult situations and inspire the orientee to further the orientee's professional goals.

In addition to nurse preceptors, there are nurses who serve as clinical coaches for nursing students. The clinical coach shares insight about the practice on the general surgical unit with the student and explains processes related to procedures and the provision of care for post operative patients. The clinical coach educates prospective nurses about general surgery within the direct patient care setting. They provide consistent reassurance and establish confidence. A primary goal of the clinical coach is to assist the nursing student in developing a time management outline which allows the prospective nurse to achieve daily and program goals successfully

Lastly, there are charge nurses who function as an extension of the nurse manager and lead the daily operations of the general surgical unit on a shift by shift basis. The charge nurse focuses on maintaining a safe, professional, efficient, and health promoting environment. A charge nurse must communicate and delegate effectively with all areas of the health care team including physicians and nurses. The charge nurses supervise patient care and the needs of the general surgical unit and makes necessary adjustments to ensure the unit remains within pre-defined budget recommendations. As a leader on the general surgical unit and as part of the role, the charge nurse must resolve conflicts straight forwardly and provide immediate feedback for all members of the general surgical unit.

It is clear that authentic leadership can be present in more capacities than just those of a formal leader. The preceptor, clinical coach, and charge nurse are all practicing transformational, authentic leadership and can all impact those with whom

they lead through meaningful recognition. Self actualization for orientees, new employees, and nurses under the charge nurse direction, can be supported from the preceptor, clinical coach, and charge nurses. The preceptor, clinical coach, and charge nurses embrace one vision and assume a visionary or futuristic approach to leadership. They energize individuals to pursue mutual goals, share visions, and embrace an empowering culture, where individual values and mutual respect are fundamental (Murphy, 2005). Therefore, going forward it is important to consider that although the cultural context of this meaningful pattern recognition practice model is defined by geographical location, organizational size, and nursing unit, it should be not confined to formal leadership roles. A closer look at relevant literature demonstrates the high value and impact recognition, from a leadership perspective, can have and reveals how meaningful recognition can reinforce a healthy work environment and promote self actualization.

Review of Relevant Literature

Leadership authors and experts Kouzes and Posner (1999) revealed that by rewarding activities and patterns that move team members closer to a goal, leaders are allowed to correct an individual's direction in a positive way. According to Kouzes and Posner (1999), by lifting the spirits of people through recognition, leadership heightens awareness of organizational expectations.

Recognition humanizes the values and standards individuals are motivated towards at a more meaningful level (Shirey, 2006). There are many forms and levels of recognition and some suggest public recognition encourages others to duplicate the actions they see rewarded. Research also maintains that meaningful recognition bonds

individuals to their manager and to one another (Failla & Stichler, 2008). An innate need for appreciation exists in most people and it is not selfish or superficial; it is an authentic, genuine aspiration when offering something of worth (Deal & Key, 1998).

Specific, timely, sincere meaningful recognition reaches people on an emotional level that no other form of communication can. The results are more intimate relationships, greater respect, and a sense of fairness within the organization (Shirey, 2006). Recognizing accomplishments and achieved targets toward larger goals affords individuals an opportunity to internalize, in a positive way, that they are being held accountable for the overall success of the project. They are being empowered (Murphy, 2005).

Literature recommends offering recognition whenever an individual delivers. By neglecting to recognize individuals, the likelihood increases the team member may not deliver again, especially if it takes extra effort, time, or stress (Deal & Key, 1998). Conversely, when people are recognized, it promotes engagement because people know individual accomplishments will be noticed and rewarded. Communication combined with recognition enables people to embrace the institution's vision and values (Matusak, 1997). It makes the vision personal and meaningful. Effective leaders realize that to mold and reinforce desired behavior and identify what really is most essential to the team, they must recognize individuals frequently, specifically, and in a timely manner (Kouzes & Posner, 1999).

Kouzes and Posner's inspirations are further validated through research studies. A non-experimental survey design studied 480 registered nurses to develop a staff nurse clinical leadership role based upon Kouzes and Posner's (1999) model of

transformational leadership. Kouzes and Posner's model suggests that when leaders understand that leadership is a relationship they begin to engage in five specific practices of exemplary leadership: model the way, inspire a shared vision, challenge the process, enable others to act, and encourage the heart. When leaders do the aforementioned, leaders are better able to embark on a lifetime of success and significance. The researchers used a 30 item Likert-scaled questionnaire, Leadership Practices Inventory (LPI), which they validated through a confirmatory factor analysis. Descriptive and differential statistics were also analyzed and statistical software was used to test hypothesized relationships and further validate the LPI. Among the conclusions of the article, the researchers suggested that nurse managers' leadership practices, including recognition, can influence staff nurses' behavior to create structurally empowering work environments (Patrick, Spence-Laschinger, Wong & Finegan, 2011).

There is specific, extensive research citing the impact and significance that transformational, authentic leadership can have in an organization. Several studies endorse authentic leadership and suggest it can be enhanced through meaningful recognition. A quantitative, descriptive correlational study performed in 2006 explored organizational commitment of staff nurses and staff nurses' perceptions of leadership characteristics. A convenience sample of 63 nurse managers and 500 nurses, who had all been in their current role at least six months, comprised the sample set. All participants completed a Multifactor Leadership Questionnaire (MLQ). The author of the article noted that prior confirmatory factor analysis indicated that the MLQ was both a reliable and valid instrument for measuring transformational leadership characteristics. Conclusions from the study suggested that nurses will follow the leadership of managers

who inspire, motivate, and recognize them. The article further states that these efforts empower nurses to perform beyond basic expectations (McGuire & Kennerly, 2006).

Another quantitative study used a comparative descriptive survey to measure staff nurses and nurse managers perceptions of meaningful recognition. There were 287 staff nurses and 55 nurse managers who participated in the study. The researcher used a survey instrument (as cited in Cronin & Becherer, 1999) developed by Blegen et al. to shape the framework for the research and states that the validity of the survey instrument used was established through content validation procedures that included literature reviews and inspections by skilled panelists. The findings concluded that managers perceptions of meaningful recognition are relatively congruent with staff nurses; specifically, the high value of verbal feedback and peer recognition. The article also suggests that the recognition of nurses is important for the purposes of enjoining individual needs, both intrinsic and extrinsic, with the mission and needs of the work organization. Of the many ideas cited in the discussion portion of the article, included is the concept of developing a recognition program that takes into consideration individual staff nurses input towards individualized recognition. This individualized consideration would make recognition more meaningful.

According to yet another quantitative study, 92% of 332 surveyed respondents from a survey conducted at 16 randomly selected Iowa hospitals, ranked recognition as important to job satisfaction. The researchers and authors of the study also noted that 44% of the respondents preferred verbal feedback and the key person they sought feedback from was the nurse leader (42%). The article went on to suggest that the

recognition given from the nursing unit leadership positively enhanced the nursing unit's attitude and contributed the efficient running of the unit (Goode et al., 1993).

Research also highlighted the importance recognition plays in nurse retention. An article published in 2003 discussed central themes evolving from three separate studies. Each study used a different instrument applied to different samples from different clinical backgrounds. All three researchers originally thought the results would indicate money as the principally desired form of recognition. The findings however did not conclude this. The article stated that while money was important, what employees wanted most were respect, recognition, and organizational commitment. The article concluded that managers play a pivotal part in employee's satisfaction and are a major factor in determining whether an employee decided to stay or leave. The article further concluded that recognition by a manager is directly related to job satisfaction. It suggested managers must provide meaningful recognition to have positive interpersonal relationships and that this related directly to organizational alignment and commitment (McGuire et al., 2003).

A qualitative study from 2002 suggested that recognition is a principle trait for transformational leaders. The researcher interviewed eight transformational nursing leaders and asked each of them 15 interview questions. The interviews were person to person, by phone, or through Email. The transformational leaders were identified as such based upon their demonstrated evidence of scholarly leadership and professional growth. The researcher then coded the interviews and identified common threads. One such thread was the notion that transformational leaders find pleasure in empowering others. The article suggested that transformational leaders are inspirational motivators who

recognize and inspire others to make dreams a reality. Lastly, the article concluded that transformational leaders have the power to positively influence future generations and create effective solutions to some of the greatest problems the healthcare industry faces (Ward, 2002).

Limitations/Gaps in Knowledge/Weaknesses

There is a lack of research exploring how interdisciplinary groups, including practitioners in the fields of business, psychology, and healthcare, could collaboratively research authentic leadership within the context of the healthcare work environment. This would enhance transparency immensely. If the concept of authentic leadership were explored extensively in collaboration with these other professions and validated through research, the fundamental underpinnings would be more apparent and readily applicable. There is also no clearly defined, common, or accepted conceptual model to validate transformational leadership as a leadership framework. More studies, both qualitative and quantitative, would enhance dependability and are needed to identify the process in becoming an authentic, transformational leader. It would be beneficial to unfold measurable outcomes associated with existing leadership programs to further dependability. Additionally, there is a lack of quantitative studies examining the sustainable effects of authentic leadership on healthy work environments. Lastly, from the research, no clear model for identifying characteristics that predispose authentic leadership or design targeted interventions to produce authentic leaders exists.

Framing Meaningful Pattern Recognition

Clearly there is reliable, valid research to support providing recognition from a leadership perspective. In addition, Newman's HEC (2008) model creatively outlines

how pattern recognition can impact relationships. As mentioned earlier the concept of meaningful pattern recognition evolves from these notions. The idea of meaningful pattern recognition itself must be defined before implications for practice can be explored.

Meaningful pattern recognition is the conscious, authentic interaction between people where universally identified enviable and desirable behaviors are reinforced through the recognition of a pattern in an individualized, meaningful way (Newman, 2008). The definition illustrates that in order for meaningful pattern recognition to occur some fundamental things must happen.

First, those who participate in meaningful pattern recognition are doing so by choice. Similarly, to participate in Newman's theory (2008) regarding pattern recognition, is a choice. One must make a decision to recognize the pattern. Next, the interaction must be authentic in nature. In order for the recognition of the pattern to be meaningful, it must be done so with indisputable, genuine intentions. The recognition of the pattern cannot be an artful manipulation of language to achieve a self invested, desired outcome. The intent has to be authentic for the betterment of the whole. Thirdly, from a leadership perspective, the focus on the interaction is to impact relationships, specifically enviable behaviors. Meaningful pattern recognition is all about relationships, but at the end of the day it also must be applicable to valid healthcare environments and issues. For example, one would not recognize individuals for a wrongdoing, error or mistake, such as continued medication errors. Conversely, one would recognize individuals who practice with safe measures and for example have no medication errors

over a defined period. Lastly, and at the heart of the definition, is that the recognition and participation of the pattern must be done so in an individualized, meaningful way.

The last portion of the definition is principal for meaningful pattern recognition to work. The recognition of the pattern must be individualized to be meaningful.

Meaningful pattern recognition cannot stand alone without any of the key components of the definition's design, especially this last one. This is the great challenge. How does one make the recognition meaningful? The answer is to find out some basic information about individuals. When it comes to meaningful recognition, one cannot just stand by idle and guess, one must find out what is most meaningful to people and then recognize individuals in a way that makes the recognition of the pattern meaningful, based on individual preferences. For example, the previously mentioned example about a nurse de-escalating a conflict between families suggested that by recognizing the pattern, the relationship became more meaningful and impacted the nurse being recognized. What if the recognition of the pattern was individualized and according to the nurse's preference?

This example can serve an illustration to more thoroughly dissect and explain meaningful pattern recognition. First, in accordance with the definition of meaningful pattern recognition, it is a choice to recognize the nurse for de-escalating the conflict between families. As the one doing the recognizing, one has to decide to act or do nothing. That is the first part of the definition. One has recognized a pattern, a choice has been revealed and decision must be made. That is pattern recognition. Next, when one chooses to recognize the nurse, one does so because they are genuinely appreciative of the nurse's efforts. One knows that de-escalating conflicts can be challenging, but is often necessary for the betterment of the patient and all those involved in the patient's

care. This leads to the next portion of the definition which includes enviable behaviors. Obviously, something that impacts patient care and the overall healthcare environment in a positive way should be reinforced. This again is done so through the process of recognizing the nurse.

It is important to point out here that there are preferences regarding recognition. Understanding that and supporting individualized values and perceptions of recognition are integral for the actual success of the recognition act and intention. If one recognizes an individual in a manner that is not consistent with that individual's preference for recognition, the act of recognizing that individual actually does the opposite of the intent. Likely, the individual being recognized will not replicate behaviors for fear of being recognized in a fashion that they are not comfortable with or do not value.

Lastly though is the idea of individualized recognition. If one has made efforts, through some sort of measures, to find out what is most meaningful to the nurse being recognized, one could recognize that nurse in a more meaningful way. Because one knows the nurse doing the de-escalating prefers to be recognized in front of the nurse's peers and absolutely loves chocolate cake, when the unit meets together at the change of shift the next day, one verbally recognizes the nurse in front of her peers and presents her with a chocolate cake.

As seemingly simple as it may sound, this creates a profound relationship between the one providing recognition and the one receiving recognition. Think about how it would feel to be recognized in this way or how it would impact perceptions. Think about historical experiences with recognition and how those experiences could have been enhanced had the recognition been done so in a meaningful way. This

reflective relationship improves teamwork because individuals begin to trust one another. Because trust is being enhanced through meaningful pattern recognition, communication improves and realistic, attainable goals can be established. In addition, the compounded effect most certainly impacts self and team accountability. The net result is that individuals move closer towards self actualization and start giving their best efforts in not only their life, but to their work and thereby create a mutual benefit for the whole.

Summary

The cultural context is clear and confirms that meaningful pattern recognition can transcend any environment. The research is plentiful to support recognition from a leadership perspective as well as from nursing theory. The definition of meaningful pattern recognition itself concisely demonstrates how the concept of meaningful pattern recognition must unfold. When one examines the art of recognition and explores how historical experiences with recognition could have been enhanced had the recognition provided been individualized, it is easy to identify how impactful meaningful pattern recognition can be. Meaningful recognition can promote a self actualized workforce, but how does one get the idea out there? Sure, the concept appears great on paper, but what are the steps and how can it actually be applied? That is the beauty of meaningful pattern recognition. If one is provided a conceptual model and structure guiding the process, it can easily, quite realistically, be put into practice.

CHAPTER THREE: Project Development

The aforementioned chapters demonstrate strong evidence for the importance of supporting and implementing a meaningful pattern recognition practice model. The question remaining is how to implement this practice model. Where does one start? It is often helpful to view ideas conceptually to identify starting and ending points of any project and the relationships in between. This can be accomplished through the use of a conceptual model. A conceptual model visually illustrates necessary steps to transition through to promote a self actualized workforce. The conceptual model can serve as a vessel and foundation to further explicate concepts, such as specific types of recognition, appropriate frequency of recognition efforts, recognition preferences, measurement, and implementation strategies.

Conceptual Model

The project conceptual model (see Figure 1, p.28) displays the relationship that meaningful pattern recognition has in motivating individuals towards a transformational leader's goal of self actualization. The model has four levels which flow in succession from the innermost ring outwards: basic needs of an individual, effective leadership, meaningful pattern recognition, and self actualization.

Basic needs. The innermost ring, the core, encompasses an individual's basic needs. In an institutional environment there is a fundamental, primary need to establish equitable pay and benefits. In institutions where an individual's basic needs are met, the individuals maintain equitable pay and benefits. This environment of equality meets the basic needs of the people although it does not authentically inspire or motivate individuals to action. The notion of implementing any project model or idea stalls

without the basic needs of individuals met. On the general surgical floor at St. Marys hospital equitable pay and benefits exists; therefore, that basic need is met. When compared with other markets in the Midwest, the nurses on the general surgical floor are paid competitively. Additionally, the nurse's retirement incentives, health insurance package, and benefits are competitive. So, for the purpose of this practice model, the fundamental, basic needs of the individuals are met. Because this first requirement is met, one can move in succession expanding outwards in the conceptual model to the next ring and ultimately, towards self actualization.

Effective leadership. Expanding outwards in the conceptual model (see Figure 1, p.28), the next ring, radiating into the body of the organization is the effective leadership level. This ring is larger than the core and here is where leadership that exemplifies and supports characteristics of effective leadership exist: trust, goal setting, effective communication, accountability (Gostick & Elton, 2007). While monetary equity is needed, the essential components of inspiration and motivation must exist for institutional operation and an effective leader is responsible for this component. These leaders have effective leadership characteristics; however, they may not be transformational leaders. They are seeking to inspire a shared vision, but have yet to accomplish that goal. These effective leaders are engaged and working with nurses to accomplish managed tasks, such as walking patients, following hospital policy and procedures, and completing discharge instructions for patients. They supervise the nurses and are responsible for the nurses getting work done. The effective leader plans, coordinates, and evaluates nurse's work.

This second level is a very important ring in the conceptual model and imperative for a meaningful pattern recognition model to be successful. As mentioned earlier, the fundamental needs of equitable pay and benefits are met at the core of the conceptual model; however, just because these fundamental needs are met, this does not equate with engaged, productive, and empowered nurses. Effective leadership must exist to promote exemplary patient care. Effective leadership is essential and without it, one cannot continue to expand outwards in the conceptual model. A leader who cannot promote and maintain an environment of trust, set realistic attainable goals, practice effective communication, and endorse self and team accountability, cannot, even with the use of meaningful pattern recognition, move outward in the model to inspire self actualization (Gostick & Elton, 2007). Again, for the purpose of this practice model, effective leadership does in fact already exist on the general surgical unit at St. Marys hospital and for that reason, one can transition out towards the next ring of the conceptual model.

Meaningful pattern recognition. It is the next level of the circular conceptual model, the meaningful pattern recognition level (see Figure 1, p.28), that makes it possible for leaders to inspire individuals committed to a shared vision. Meaningful pattern recognition is the ever expanding conscious level of the circle where leaders are establishing meaningful, authentic relationships with individuals. This notion allows the effective leader to change to a transformational, authentic leader. No longer is the focus solely task associated for nurses and leadership, now the concentration of efforts has modified to include the vision of the organization and the general surgical unit and there is a change from seeking to inspire, to inspiring. Only then, after meaningful pattern recognition does the unit reach the final outermost level of the circle and that is self

actualization. This is the purpose and goal of this practice model. This is where the general surgical unit at St. Marys hospital needs to go and meaningful pattern recognition can get the general surgical unit there.

Leadership on the general surgical floor at St. Marys must embrace the notion of meaningful pattern recognition to even be in a position to promote self actualization among the nurses. Meaningful pattern recognition is the genuine, authentic part of leadership. Meaningful pattern recognition is what will bond nurses to leaders and to one another. It is the unadulterated, pure catalyst to self actualization.

Self actualization. Self actualized people are engaged and willing to give their best efforts to their work and life, creating mutual benefit for the organization and the individual. Meaningful pattern recognition allows leaders to energize individuals to pursue mutual goals and shared visions, and embrace an empowering culture where individual values and mutual respect are fundamental. This is the most outer ring of the conceptual model, the self actualized workforce (see Figure 1, p.28), where the vision of a transformational, authentic leader exists. Trust and teamwork are plentiful and expert, effective patient care is the standard. Self actualized nurses realize that clinical expertise alone does not meet expectations. Self actualized nurses go above and beyond to align with the organization's intent and identity. They model the way, anticipate change, and capitalize on change to elevate patient care and impact nursing practice. They give their best efforts not because they have to, but because they want to. They are in a collaborative, meaningful relationship with the organization and their leaders; therefore, they care.

In this type of work environment safe behaviors exist because nurses trust one another and the organization, and are committed to one another and the organization's values and goals. Because this trust and collaborative, mutual vested relationship exists, nurses can speak up to exact changes to policies, practices, and procedures that may have otherwise continued to exist. Self actualized nurses help one another with patient care and they look out for one another. Self actualized nurses speak up to prevent and stop errors, they value mutual respect, and they believe in one another. All of the aforementioned traits of a self actualized nurse contribute to maintaining an environment of safety.

Conceptual model. The entire meaningful pattern recognition practice model (see Figure 1, p.28) is a circle, ever rotating, ever expanding and contracting, but always existing in the same pattern. Congruent with notions from Newman (2008), the circle represents the undivided wholeness of the organization and each part is integral for succession. Each ring of the circle impacts the other in a unique, dynamic way and each ring shares a relationship with the next. The circle offers a physical (pay and benefits), spiritual (effective leadership) and conceptual (meaningful pattern recognition and self actualization) method for successful transformational leadership. Again, similar to Newman's theory of HEC (2008), the circle suggests self actualization is a layered process and is, at the same time, a singular experience.

FIGURE 1: Meaningful Pattern Recognition Conceptual Model

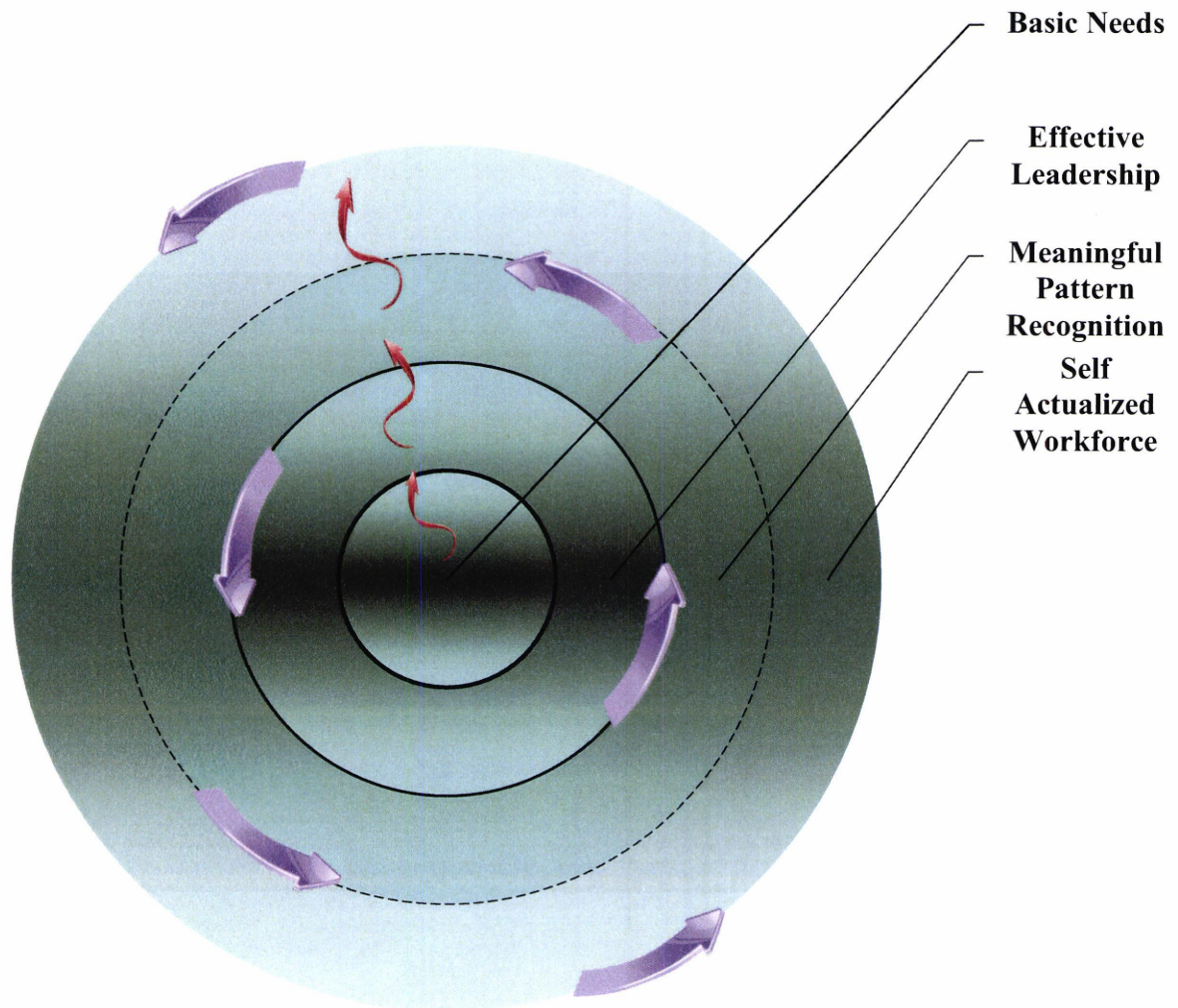


Figure 1. A conceptual model for transformational, authentic leadership to promote self actualization through meaningful pattern recognition.

Project Planning: Types of Recognition

The conceptual model (see Figure 1, p.28) visually demonstrates how to promote self actualization and what must exist for self actualization to occur. As mentioned earlier, the general surgical unit at St. Marys hospital does indeed meet the fundamental, basic needs of the nurses, and is a core component of the conceptual model. Likewise, the general surgical unit at St. Marys has effective leadership; therefore, the hospital unit meets both of the inner two rings of the conceptual model. Now it is time to unfold how the effective leadership on the general surgical unit may use meaningful pattern recognition to inspire self actualization. The intent is to move leaders on the general surgical unit from the second level in the conceptual model, which is effective leadership, outwards to meaningful pattern recognition and beyond towards the outermost ring of the circle, a self actualized workforce. A plan, a strategy must evolve here from some basic information about recognition itself before going further. According to Gostick & Elton (2007), recognition can be broken down into four defined categories: day to day, above and beyond, loyalty/employment, and celebrations.

Day to Day

Gostick & Elton (2007) suggest that day to day recognition should happen every seven business days or 35 times per year. Day to day recognition is the daily ongoing encouragement of the small steps that lead to success given to anyone that meets, but not necessarily exceeds, performance expectations. These encouragements are the pat on the back, the hand written notes, the gift of thanks, cards, emails and other ways one regularly praises and expresses gratitude. This is a low cost, but always highly sought after form of recognition that must be frequent, specific, and timely. This could be as

simple as saying thank you to another nurse at the end of the shift for all the help during the day. This is again, low cost, takes minimal effort and time, but can be very personal and impactful. Day to day recognition builds personal relationships that can impact trust and improve communication, accountability, and ultimately, improve teamwork.

Above and Beyond

Above and beyond recognition is broken down even further into three levels: level I, level II, and level III. This form of recognition should happen at least every two years. It is important to note though, that high level performers will receive forms of above and beyond recognition multiple times throughout their career. When people go above and beyond they deserve a more formal response than day to day recognition. These awards provide a structured way to reward significant achievement, core values, and goals. Above and beyond recognition is paramount to setting and meeting realistic attainable goals that aspire towards a vision. An above and beyond form of recognition must have value, be impactful, and be personable (Gostick & Elton, 2007).

Level I. Level I above and beyond recognition is recognition for the one time above and beyond behaviors related to core values. This is the nurse who cares for an angry family member or patient, takes on additional duty, finds ways to improve routine process, comes up with a creative solution to a problem, or puts together a great pitch for a new idea. Level I above and beyond recognition should be a presentation of a personalized award according preference, which means it does not have to be in front of co-workers or peers. The recognition is according to personal preference and may occur via Email, or in person, or in whatever fashion the individual being recognized prefers and values (Gostick & Elton, 2007).

Level II. Level II above and beyond recognition is also the recognition of behaviors related to core values; however, these are nurses who consistently demonstrate core values, such as working on challenging customer issues, develop sophisticated changes to improve important processes, demonstrate outstanding leadership, improve the way the unit pitches prospective projects, mentor a new employee to productivity, provide exceptional customer care, and so on. The distinguishable difference between level I and level II is frequency of above and beyond behavior. Level I is the one time behavior, while level II are those who consistently demonstrate the behavior. Level II above and beyond recognition should be a presentation of a personalized award in front of all co-workers (Gostick & Elton, 2007). It is important to present the recognition in front of all the coworkers to visually reinforce enviable behaviors. A nurse who demonstrates a level II above and beyond effort must be recognized in front of others so that everyone can appreciate the significance of the nurse being recognized for his/her contributions.

Level III. Level III is the last of the above and beyond forms of recognition and it is used to recognize behaviors that define careers and/or produce bottom line results. It can be a one time achievement or it could be for ongoing accomplishments. Level III is the highest level of above and beyond awards. Level III recognition of a nurse on the general surgical unit at St. Marys would be a nurse who clearly influences the general surgical unit's financial position, develops a new system that saves money, wins an award, introduces a new process that improves efficiency, presents at a national conference, achieves an educational milestone, specialty certification, or scholarly publication. The level III above and beyond form of recognition, like level II, should be

a presentation of a personalized award presented in front of all co-workers on the general surgical unit. The difference in the presentation between level II and level III above and beyond recognition is that while level II is presented in front of others, level III specifically should be in front of co-workers on the general surgical unit (Gostick & Elton, 2007).

Loyalty/Employment

Gostick & Elton (2007) recommend recognizing loyalty and employment upon hiring, and then at 90 days, 1 yr, 3 yrs, 5 yrs, 7 yrs, 10 yrs, then every 5 yrs thereafter, until retirement. The general surgical unit at St. Marys already has a form of loyalty/employment recognition; however, it is not nearly as frequent as what is suggested. This type of recognition should be a formal recognition on the nurse's anniversary of hiring date. Loyalty/employment recognition may not be as intimate as day to day recognition or the levels of above and beyond recognition, but it is vital in ensuring that the organization, and not just the general surgical unit, is committed to the individual. This form of recognition demonstrates to the nurse that they are valued for the continued loyalty and years of dedicated service. Loyalty/employment recognition bonds the nurse closer to the organization as a whole.

Celebrations

Celebrations include budget goals, team achievement, holiday parties, or anything that shows that the general surgical unit is in it together. This form of recognition should occur at least semi-annually (Gostick & Elton, 2007). Celebration recognition is an opportunity for all the nurses on the general surgical unit to take place in a form of recognition. Each nurse should experience day to day recognition often, but the above

and beyond, and loyalty forms of recognition will not be as frequent, and they are individualized. Celebration recognition demonstrates how the team achieved an outcome or is growing together. It an opportunity for the whole to take part in the process, rather than singular experiences. It is, much like the rings of the conceptual model and not dissimilar to Newman's theory of HEC (2008), a layered, relationship based experience and integral for the collective unit to moves towards self actualization. Everyone, each nurse, plays a role on the unit and has value. They are all part of the process and impact each other. Each nurse does something wonderful everyday and influences a patient's life. That is a tremendous gift and honor and a celebration of the unity and collective efforts of the whole should be recognized.

Recognition Questionnaire

Now that the different types of recognition, appropriateness, impact, and frequency have been identified, it is time to explore how to make those forms of recognition meaningful. At this point one now knows about what transformational leadership is and the value of leading transformationally. One knows about Newman's theory of HEC (2008). One has been exposed to the notion of meaningful pattern recognition and has even reviewed a conceptual model that demonstrates how to achieve self actualization. The types of recognition have also been explained. What remains, and what is imperative for the success of the practice model, is how to make the recognition of the pattern meaningful. A recognition questionnaire would allow individuals to share what is most meaningful to them and could be utilized by others when affording recognition to make the recognition of the pattern meaningful.

To reiterate, the intent and purpose of this project and practice model, is to develop a meaningful recognition model for authentic nursing leadership to embrace and promote the self-actualization of nurses at the nursing unit level in a Midwestern academic hospital. Thus far, everything is explained in this paper except how to make the recognition meaningful and practice model implementation. As meaningful recognition and the recognition questionnaire (see Appendix A, p.60) is explained, it is imperative to note that the recognition of efforts is really recognition of a pattern.

Meaningful recognition at St. Marys hospital. Ironically, making recognition meaningful is a lot easier than one may think. All one must do is ask a few simple questions. A few key questions can make all the difference. For example, the general surgical unit at St. Marys hospital could send out a recognition questionnaire (see Appendix A, p.60) to each nurse on the floor and ask, what are your career aspirations, what is most important to you at work, what do you want others to know about you, and what forms of recognition do you most value most, i.e. personal thank you, Email, presentation, plaque, celebration, etc? The questionnaire is short, simple, and to the point. The answers are stored on a database. Now comes the fun part. Nursing leaders who are provided with the answers to those questions can recognize those nurses who responded in a meaningful way. Each of the questions are significant and play an equal role in recognizing an individual in a meaningful way.

As the questions are explored, keep in mind the conceptual model (see Figure 1, p.28). Remember that the basic needs have been met and that effective leadership is already in place on the general surgical unit at St. Marys hospital. A connection will unfold with each question that will impact the effective leader's ability to lead, promote

transformational leadership, and ultimately promote self actualization. Remember that an effective leader sets realistic attainable goals, practices effective communication, endorses self and team accountability, and promotes and maintains an environment of trust (Gostick & Elton, 2007). As the reader of this paper, think about personnel experiences as the questions from the recognition questionnaire are explored. Think about personal experiences or similarities to the examples and potential feelings that may have evolved had one been afforded recognition in this manner.

What are your career aspirations? Why is this question (see Appendix A, p.60) important? What role does it have in recognizing an individual? It is important to know so that when recognizing individuals, one is doing so in a way that promotes goal attainment. Recall that effective leaders set realistic, attainable goals. Individuals that can motivate others to achieving those goals in a meaningful way are leading transformationally.

If Nurse A answers the question about career aspirations by saying that he or she wants to be a nurse practitioner, that is valuable, individualized knowledge. Now when it comes time to recognize Nurse A, in any of the defined recognition categories, one can offer recognition that relates to the nurse practitioner field and thus the recognition will likely be more meaningful. For example, Nurse A notices that another nurse on the general surgical unit is struggling with a patient assignment. Nurse A, without prompting, takes the initiative to answer some of the struggling nurse's call lights and passes several of the struggling nurse's patient medications, all the while still taking care of his or her own patients. When it comes time to recognize Nurse A for his or her demonstrated leadership and commitment to teamwork and accountability, one provides

words of thanks, but also shares that one believes Nurse A will, based upon her ability to handle stressful situations and work autonomously, one day make an exemplary nurse practitioner. That individualized recognition makes the recognition meaningful. One knows what is meaningful to Nurse A based upon the questionnaire.

The individualized recognition in this example promotes goal attainment for Nurse A and the general surgical unit. Nurse A knows that leadership is authentically committed to his or her success as a nurse practitioner by believing in him or her. This faith, this genuine support aligns Nurse A with the general surgical unit's intent; therefore, Nurse A commits to the general surgical unit goals as a mutual, authentic investment.

What is most important to you while at work? This question (see Appendix A, p.60) is founded on a leader's ability to endorse self and team accountability. What is most important at work are the patients, but what is most important to each nurse providing care for those patients is unique. This information is highly valuable to know when recognizing individuals. Some nurses value time management. Some nurses value conversation with patients. Each nurse is, again, unique and this diversity adds to the richness of the work environment. This diversity promotes varied approaches to nursing and providing care. All patients are exceptional and require distinct, diverse forms and levels of care.

For example, Nurse B is working the night shift on the general surgical unit and discovers that one of her patients is discharging in the morning to a skilled nursing facility and requires a discharge summary prior to leaving the hospital. Typically, the discharge summary is completed by the day shift, but due to a very busy day shift on the

previous day, the discharge summary was not completed. While at work, Nurse B believes it is most important for her that patients are allowed to discharge home when the patient is supposed to be discharged home and that nursing not delay that discharge. Nurse B, although unfamiliar as a night nurse with the discharge summary process, utilizes her resources and completes the discharge summary prior to the day shift arrival. This is the first time Nurse B has ever done this.

When Nurse B is recognized for her efforts, it is done so from an above and beyond level I perspective and at the shift change. The following morning one recognizes Nurse B and praises her accountability. By recognizing Nurse B at shift change in front of others, one endorses team accountability as well. This form of recognition also promotes self accountability and encourages others to replicate similar behaviors. The recognition of the pattern has moved beyond the task of completing the discharge summary and has transcended into a meaningful relationship with Nurse B and has potentially influenced the patterns of others.

What do you want others to know about you? (see Appendix A, p.60) When someone intentionally shares something about themselves with others, when asked, it identifies something an individual is very passionate about. It could be a favorite recreational activity, it could be that one bakes cakes commercially, or it could be that one has overcome cancer. Regardless of the content, what is most important is that others be aware of what the answer to the question is. This heightened awareness builds relationships and enhances the ability to communicate effectively.

A charge nurse working on the general surgical unit might be aware that Nurse C, based upon the information provided in the recognition questionnaire, had an infant

grandchild pass away. The anniversary of that infant's passing is approaching. As an effective leader, the charge nurse recognizes Nurse C on the anniversary of the infant's passing by affording Nurse C a solitary, single red rose to honor the passing. This gesture exemplifies compassion, generosity, and authenticity. Because of the charge nurses actions, the relationship between the charge nurse and Nurse C is now forever changed. Nurse C will remember that moment forever. The recognition of the infant's passing, again, a pattern, specifically a macroscopic pattern that is reflective of mortality, impacts the nature of the charge nurse and Nurse C's association. No longer are they just co-workers on the general surgery unit, they are now intimately connected through the recognition of the pattern.

This type of behavior, this meaningful pattern recognition, is leading transformationally and demonstrates how the conceptual model (see Figure 1, p.28) is always expanding and contracting. It shows the relationship, the movement, between the outermost rings of the circle: meaningful pattern recognition and self actualization. Because the charge nurse recognized Nurse C in a meaningful way, they have a better rapport and understanding of one another. This promotes an environment where effective communication can thrive. Nurse C won't be hesitant to communicate with the charge nurse because of the enhanced relationship. Nurse C knows the charge nurse cares about her not only as a co-worker, but as part of the whole and that promotes self actualization for Nurse C.

What forms of recognition do you value most? The final question (see Appendix A, p.60) is quite simple. In order for recognition to be meaningful it must be afforded in a manner consistent with expectations. It does little good to recognize

someone in front of a large audience at a nursing convention if the individual being recognized does not value public recognition. By recognizing individuals according to preference, the effective leader is promoting an environment of trust. The effective leader is demonstrating respect and value by adhering to personal preferences.

An example might be the nurse manager recognizing Nurse D for achieving a masters degree in nursing. This type of accomplishment is categorized as a level III above and beyond event and should be recognized accordingly. However, Nurse D indicated in her recognition questionnaire that she prefers private, verbal recognition. Although above and beyond level III recognition suggests the individual should be recognized in front of their peers at a presentation, the nurse manager does not do this. She instead recognizes Nurse D privately, in her office with verbal praise and acknowledgement. The nurse manager, at a following gathering among all the members of the general surgical unit, notes that Nurse D obtained her masters degree in nursing, but does not do a formal presentation or single Nurse D out. By adhering to Nurse D's recognition preference, the nurse manager is leading transformationally because now Nurse D trusts the nurse manager. In addition, because the nurse manager is moving beyond perfunctory trust, which is effective leadership, to authentic trust, which is transformational leadership, the nurse manager has expanded into a relationship of trust. Nurse D knows that the nurse manager values Nurse D's preferences and individuality. Nurse D also knows that the nurse manager values all of Nurse D's hard work and academic accomplishment. This promoted trust leads to self actualization for Nurse D.

Recognition for transformation. All of the aforementioned recognition efforts are more complex than just the recognition and the words exchanged. At a conscious

level what is really happening is that a relationship is being built and higher levels of caring are being explored. The recognition of efforts is really recognition of a pattern. Just by recognizing the pattern, one has entered into a higher level of caring because one has made a choice to act. By choosing to act, one has chosen to care. To make the recognition of the pattern even more profound, one has done so in a way that is meaningful. One has not done so again as an artful manipulation of language or with hopes of directing. One has done so as a genuine gesture of gratitude and consequently, individuals move closer to self actualization and by doing so has changed from an effective leader into a transformational leader. Individuals now want to come to work and give their best efforts because they know their efforts will be appreciated. That is what meaningful pattern recognition is about and that is how it can motivate nurses towards self actualization. Think about it.

Practice Model Implementation

Implementing a meaningful recognition practice model on the general surgical unit at St. Marys hospital would not be all that difficult. The practice model implementation would already begin at the third ring of the conceptual model (see Figure 1, p.28). What is most important is to have a few key individuals on the general surgical unit champion the initiative. There would have to be a component of education for these individuals to understand the conceptual model and process and that could occur once the group is assembled. This group of individuals should include, at least, the nurse manager, a charge nurse, a clinical coach, and a nurse preceptor: the model initiation group. The meaningful pattern recognition practice model could also be incorporated into an already existing group, or committee on the nursing unit that included the

aforementioned leadership individuals. Whatever group is charged with the task of taking on this practice model would have to be wholly committed. The meaningful pattern recognition practice model will take some time and effort at first.

A pre-practice model implementation survey, which would be used to measure the effectiveness of the meaningful pattern recognition practice model, would be required and recognition questionnaires (see Appendix A, p.60) would be electronically sent out and collected. The survey tool of choice to measure effectiveness would be adapted from the Healthcare Team Vitality Survey from the Robert Wood Johnson Foundation (RWJF) (Crum, 2008). This survey tool is part of RWJF's national program *Transforming Care at the Bedside* and assesses team functioning, attitudes toward safety, the organizational climate, and satisfaction among nurses (see Appendix B, p.61). That information would be recorded in a database on a spreadsheet. The results of the recognition questionnaire would then be disseminated to the entire general surgical unit via Email. The recognition questionnaire would then be done again annually at each employees yearly evaluation and whenever a new staff member is hired for the unit.

Although the model initiation group would be in charge of the meaningful pattern recognition practice model, it is important for everyone to be included in the process of practicing meaningful recognition. For this reason, it is essential to disseminate the answers from the recognition questionnaire (see Appendix A, p.60) to everyone. Therefore, if all the nurses on the general surgical unit are included, when it comes time to recognize one another, other members of the unit who are not on the model initiation group, can recognize one another in a meaningful way.

The model initiation group would meet monthly and identify individuals to recognize according to the type of recognition and level of recognition described earlier in this chapter. That information would be recorded on a spreadsheet (see Appendix C, p.62). The spreadsheet would be evaluated monthly by the model initiation group to ensure that individuals are using the practice model and, in fact, providing recognition in a meaningful way. The spreadsheet also serves as a tool to track the frequency of recognition for each individual and the type afforded. It is imperative to recognize everyone at some point. Each nurse is doing something important every day on the general surgical unit. Each nurse deserves recognition and each nurse contributes their efforts, their patterns, to the whole.

By recording when individuals are recognized, one can keep track to ensure that everyone is recognized. It is essential everyone be afforded meaningful pattern recognition. The day to day recognition would have to be a demonstrated conscious effort. The members of the model initiation group would have to model the way. Eventually, in time, recognizing one another would begin to transcend the general surgical unit and meaningful recognition would become the culture. It is important to have those key champions initially though to lead the initiative and demonstrate meaningful pattern recognition.

Eventually the process of providing meaningful recognition becomes infectious. Individuals do not seek recognition for attention or because they are selfish or want to be in the spotlight. Individuals seek recognition because they want to be appreciated and deemed worthy when contributing their work. The meaningful pattern recognition

enables effective leaders to grow into transformational leaders and promotes self actualization of all those involved in the process on the general surgical unit.

Summary

A conceptual model of how meaningful pattern recognition promotes self actualization provides a visual representation of the process (see Figure 1, p.28). The circular design of the conceptual model and notions related to transitioning throughout the levels of the conceptual model are consistent with Newman's theory of HEC (2008) and notions of pattern recognition. From the model one can delve into the different types of recognition to more fully understand the basic fundamentals of providing recognition itself. It is important to understand the relationship between the rings of the conceptual model and the concepts of expanding and contracting, and the movement outwards from the center as this is the process of transformation. Once one understands the model and the types of recognition, one can look for ways to identify how to make recognition meaningful.

The recognition questionnaire (see Appendix A, p.60) is one strategy to make recognition meaningful. The questionnaire is specific and the questions are related to promote an effective leader's abilities and encourage transformational leadership. This transformational leader can then recognize individuals in a meaningful way to endorse self actualization. The implementation process although relatively simplistic, will take some key champions to model the way before the meaningful pattern recognition practice model would transcend the general surgical unit. The entire project would of course have to be measured initially and then annually to assess the effectiveness of the model using

an appropriate validated survey tool. This process will be explored next as well as personal reflections of the project.

CHAPTER FOUR: Discussion and Evaluation

In today's nursing era, it is imperative to be certain that any new process, practice model, or idea introduced be valuable for nurses. The rate of change in the healthcare field is alarmingly high and will likely not decelerate any time soon. It then becomes important for nurses to anticipate change and capitalize on it. Rather than resist change, embrace it. Nurses can do this. They do this every day. Because nurses are expected to deal with constant change and are skilled at doing so, it is important to make certain changes are understood and perceived as valuable. The meaningful pattern recognition practice model must be explained and then staff must have their satisfaction measured by a validated tool. This sets the bar from which to evaluate from and adds credibility to the practice model. Even if the general surgical unit at St. Marys hospital has very high staff satisfaction and are engaged in their work, that satisfaction level can always be higher. Knowing how to meaningfully recognize one another will impact that satisfaction level and promote the ultimate goal of this entire practice model: self actualization among nurses.

Measurement of Self Actualization

As mentioned in Chapter Three a pre-practice model implementation survey adapted from the Healthcare Team Vitality Survey (see Appendix B, p.61) would be required. The same survey should be conducted yearly to identify the effectiveness of the meaningful pattern recognition practice model. If nurses are self actualized, they are engaged and willing to give their best efforts to their work. Giving their best efforts to their work also means that nurses are highly conscious about patient safety and collaborative teamwork. Nurses who are engaged realize they each contribute to the

organizational culture and they each are part of the whole. The other component of self actualization, which is usually obvious in their professional nature, is that self actualized nurses are satisfied. The survey tool utilized to measure the effectiveness of the meaningful pattern recognition model must incorporate all these components: patient safety, collaborative teamwork, the organizational climate, nurse satisfaction, because all of these components are essential for self actualization.

The adapted survey tool, the Healthcare Team Vitality Survey (see Appendix B, p.61) is from the RWJF. RMJF supports the notion that optimal patient care requires effective teamwork, an engaged staff, and that to exact change in the hospital environment, quality measures must be utilized to drive innovation (Crum, 2008). This survey tool would be the quality measure used to evaluate the effectiveness of meaningful recognition practice model.

The survey tool would be distributed electronically and be required for nursing to participate in. The model initiation group overseeing the meaningful pattern recognition practice model would be responsible for ensuring that everyone participates in the survey and for collecting that data. The data would be evaluated annually and utilized to implement specific changes to the meaningful pattern recognition practice model to enhance effectiveness and identify unique changes that may be appropriate to promote self actualization of nurses on the general surgical unit.

Tool effectiveness. A qualitative and quantitative assessment using the survey tool over two phases was conducted by the University of California Los Angeles (UCLA) to validate the tool. The two phase process concluded that the Healthcare Team Vitality Survey participants surveyed were consistent in their understanding of most questions

and therefore the survey tool is content valid. Reliability was validated through an extremely high internal consistency of the tool. Lastly, UCLA indicated that the survey tool when compared to other validated survey tools, did in fact measure what it set to do, measure vitality, and therefore has concurrent validity. UCLA concluded that the Healthcare Team Vitality Survey can be used to collect meaningful data related to the vitality level among healthcare professionals (Crum, 2008).

UCLA suggested that the survey tool could contribute extensively to advance knowledge to promote retention of health care providers as well as efforts to transform the acute care work environment (Crum, 2008). For these reasons, the adapted Healthcare Team Vitality Survey would be the measurement instrument of choice to evaluate the meaningful pattern recognition practice model. It is however important to recognize and acknowledge that the tool is adapted; therefore, the tool cannot hold the same credibility as the un-adapted version.

Analysis and Critical Reflection

Because little research exists detailing meaningful recognition practice models, it is difficult to analyze the described meaningful pattern recognition practice model. At the same time, this lack of research unfolds the rare opportunity to pursue something with profound implications that could contribute to the nursing profession and nursing theory implications. As a professional nurse, who is committed to elevating patient care and promoting a healthy work environment, it is worthy of pursuit.

Personal experiences have revealed that meaningful pattern recognition does work and that it can change an effective leader into a transformational leader who promotes self actualization. This has been personally witnessed and experienced at

meetings with senior nursing leadership, on general medical units, and in intense operating rooms, where meaningful pattern recognition has promoted self actualization. These experiences have created opportunities for profound personal and professional growth by deepening the intuitive knowing. It has impacted personal abilities to lead not just effectively, but transformationally. This personal change in leadership style that evolved from meaningful pattern recognition goes far beyond the context of personal experiences though, it influences others and that is the real reward. This personal transformation to authentic leadership by utilizing meaningful pattern recognition has empowered several co-workers to pursue their own professional growth by pursuing the next level of education or specialty certification, by transitioning to an intensive care unit, or by taking the charge nurse role. The list of those impacted grows daily.

A key difference between personal experiences and the meaningful pattern recognition practice model is that, unlike specific, unique personal experiences, the model is applicable to everyone. The model permits everyone to have a voice on the recognition questionnaire and holds those charged with championing the model accountable to include everyone. The practice model is a universal model rooted in wholism and fundamental to care. The meaningful pattern recognition practice model can affect anyone, and this affect can transcend to others. The affect, the promotion of self actualization, impacts anyone who is exposed to individuals whom embody and participate in the meaningful pattern recognition practice model.

Barriers to Implementation

There are obvious barriers to any new initiative and they should be acknowledged. Historically, recognition has been equated with financial rewards. There would be challenges addressing the subject of financial compensation as a form of recognition when the practice model is initiated. Other concerns would be acquiring the dedicated time from individuals to work on the practice model initiation group. There are concerns about nurses being off the nursing unit to work on committees as this directly impacts daily nursing staffing. Additional barriers would include nurse concerns about being put in the spotlight, resistance to completing the recognition questionnaire, formulating an efficient database to store the recognition questionnaire, and comfort issues regarding giving and receiving recognition.

Paralleling Newman

The meaningful pattern recognition model parallels Newman's (2008) work in that patterns are portrayals of the undivided wholeness of the universe. A sense of knowing evolves from the recognition of the pattern and although the pattern is unique, it is not a singular occurrence. As mentioned earlier, the pattern is a complex, multifaceted event that exists in variable space and time elements. Patterns are always present, but it is the recognition of patterns that promotes a sense of knowing. Recognizing individuals for behaviors, which are patterns, is a choice and a conscious effort that leads to a heightened sense of knowing. The recognition of the pattern is meaningful because it is done so according to preference. This heightened sense of knowing supports caring and advances the ability to promote self actualization.

Think about how one works daily. Surely there are those with whom one knows on a more intimate level within their work environment. Because there is heightened sense of knowing with this person, one can appropriately recognize them and the work environment improves. Why leave it up to those who know each other well? Why not incorporate everyone and impact an entire unit culture instead of just one person? That cannot be done unless everyone has an equal opportunity to contribute and everyone must be recognized in meaningful way.

Summary

Measuring the meaningful pattern recognition practice model is very important. Not only does it validate the model, but it ensures that valuable time is not being wasted by nursing implementing something that is not effective. It is vital that an initial measurement be taken by a validated, appropriate tool, such as the Healthcare Team Vitality Survey, and that the survey is conducted at least annually. The principal ideas incorporated into the meaningful pattern recognition model are similar to, and support the same fundamental concepts, of Newman's theory of HEC (2008). Although no clear research exists to analyze meaningful recognition, personal experiences related to employing the concept are relevant and abundant. Personal experiences have allowed for professional growth that has impacted others which is reflective of transformational leadership and the promotion of self actualization in nurses.

Chapter Five will discuss the implications meaningful pattern recognition can have on nursing practice. It will also unfold the profound impact meaningful pattern recognition can have on the future of nursing leadership. Lastly, personal experiences

that further demonstrate the impact and worth of pursuing meaning pattern recognition will be detailed.

CHAPTER FIVE: Conclusions and Implications

Meaningful pattern recognition is founded in nursing theory. The entire framework of meaningful pattern recognition is based on nursing theory. Historically it has been difficult to move nursing theory into practice. Meaningful pattern recognition is the exception. The implementation of meaningful pattern recognition in the workplace is praxis: research taking the form of practice, rather than practice taking the form of research (Newman, 2008). Meaningful pattern recognition's influence can change a unit culture. It can transcend a hospital. Most importantly, and at the end of the day, the bottom line is that patients will receive heightened care because self actualized nurses are caring for them.

Implications for Practice

If leadership on a nursing unit is already effective, why would leadership not embrace the inspiration of meaningful pattern recognition? Meaningful pattern recognition costs next to nothing and literally, much of the recognition is free. It requires minimal time or effort. Any nursing unit that values trust, accountability, goal setting, and communication should endorse meaningful pattern recognition. Any nursing unit that values patient care knows that optimal patient care requires effective teamwork and an engaged staff, and that to exact change in the hospital environment, innovation must occur.

Meaningful pattern recognition is the catalyst to move effective leaders towards transformational leadership. Meaningful pattern recognition enables nurse managers, charge nurses, nurse preceptors, and others to re establish trust or enhance trust. When trust is compromised, it is exceedingly difficult to restore. Imagine a nurse who does not

trust her nurse manager because the trust has been compromised. How can that nurse manager show her nurse that she is trustworthy? How can she rebuild that relationship? One example would be that the nurse manager can recognize the nurse according to his/her preference for a job well-done while he/she was orienting a new nurse. This meaningful engagement will impact the relationship and if the nurse manager continues to recognize the nurse in a meaningful way, over time, trust will be re established. That is leading transformationally. Similar scenarios can be explored and have been described earlier that demonstrate the influence meaningful pattern recognition can have not only on trust but goal setting, accountability, and communication.

Meaningful pattern recognition is not an idea that will forever exist in text books or the classroom. It is not meant to be left in the clouds or minds of others. Meaningful pattern recognition is real and intended to be used in the workplace to promote self actualization. Everyone has leadership potential. Everyone can utilize meaningful pattern recognition. Although it was created in nursing, it can certainly be applied to any professional arena. It does not matter if one works in a corporate law office, as a rodeo clown, or a prison guard, the model can be applied and be relevant for promoting self actualization.

Meaningful pattern recognition, again consistent with Newman's theory of HEC (2008), is universal. It is the oneness, the universal bond between people and their environment that surrounds everyone daily. The patterns are there. One may not see them, but they are there. When one shares a pattern with another and then is recognized in a meaningful way, engagement happens. Caring has occurred. Meaningful pattern

recognition is part of human nature and the implications, microscopically and macroscopically, impact everyone and everything.

Future of Nursing Leadership

Two of the six tenants of the American Association of Critical Care Nursing (AACN) that are principal for promoting a healthy work environment are authentic, transformational leadership and meaningful pattern recognition. Both of these tenants are related and promoted through meaningful pattern recognition. Meaningful pattern recognition is time relevant, appropriate, and is a practice model that can supplement the effectiveness of the authentic leader and meaningful recognition; therefore, it impacts a healthy work environment.

Transformational leadership is the future of leadership in nursing. Transformational leaders energize individuals to pursue mutual goals, share visions, and embrace an empowering culture, where individual values and mutual respect are fundamental (Murphy, 2005). Transformational leaders strive to create a self actualized workforce to “the level of performance where workers are engaged and willing to give their best efforts to their work, creating mutual benefit for the organization and the individual” (Gostick & Elton, 2007, p. 59). Meaningful pattern recognition is the bridge for transformational leaders to get individuals to self actualization. It is that meaningful relationship, established through recognition that will build confidence, inspire a shared vision, enhance engagement, create an empowering respectful culture, and these transformational leadership inspired actions will shape the future of nursing.

Reflections and Insights

There is extensive literature to support transformational leadership and meaningful recognition. Several qualitative and quantitative studies have been conducted. The combination of the scholarly literature and Newman's theory of HEC (2008) creates a practice model for meaningful pattern recognition (see Figure 1, p.28). Newman's work is foremost to the notion of meaningful pattern recognition. Newman's theory of HEC (2008) and pattern recognition form the framework and set the foundation for what meaningful pattern recognition is all about. Meaningful pattern recognition, like the theory of HEC, is a universal opportunity. It is always there to capitalize on because patterns are always occurring. The recognition of these patterns demonstrates care and creates a choice. The choice allows one to either expand their consciousness to become and take part in the life of one another, or not. Regardless, everyone is impacted by the pattern. The same holds true for meaningful pattern recognition. When someone is recognized in a meaningful way, the effect transcends not only those directly involved in the act, but others as well. The act is bigger than oneself.

A conceptual model (see Figure 1, p.28) further demonstrates the impact and relationships transformational leadership can have in promoting self actualization. This visual representation operates in succession from the inner core expanding outwards and thrives again on concepts of universality and wholism. The act of recognition itself can be broken down in several specific types and categories. These types of recognition and appropriate frequencies are important for understanding how and when to afford recognition.

The greatest hurdle in providing recognition is in making the recognition meaningful. That can be accomplished from a simple recognition questionnaire that asks specific questions for an effective leader to utilize to lead transformationally and promote self actualization. This questionnaire allows leaders to tailor recognition. The recognition questionnaire is essential for the meaningful pattern recognition model.

Implementing the meaningful pattern recognition practice model is surprisingly easy. Because recognition is low cost, there are few financial barriers. The biggest barrier is getting those to champion the initiative, record data from the questionnaires, conduct appropriate, validated, pre and ongoing surveys and record how often individuals are recognized. It is imperative that each individual be recognized. Everyone is part of the culture and everyone in some capacity is contributing something. Those contributions, no matter how small, are worthy of recognition in a meaningful way. To not recognize everyone, is to not lead transformationally.

Although there is no research on meaningful pattern recognition, personal experiences demonstrate the worth of implementing such a model. As a nurse, a professional, a father, and as a human being, it is important to contribute to recognizing others in a meaningful way. Meaningful pattern recognition is all about authenticity and relationships. It is the glue that seals the gap between strangers. It builds characters, strengthens communities, and fosters growth.

Summary

Humankind and health are part of a complex adaptive system. The beauty is, universally nursing theories that support the idea that health is part of a complex adaptive system, like Newman's theory of HEC (2008), suggest that the patterns that impact health

continue on, even when one least expects it. That is what makes meaningful pattern recognition so compelling. From this perspective, health is free, autologous, and infinite. Health is always there, endless and unbound. It is now only left up to people to embrace meaningful pattern recognition and recognize one another, because they are a part of it whether they know it or not. By embracing this notion, self actualization can not only evolve, but it can thrive. Meaningful pattern recognition shows and validates that people are an unbiased, equally principal ingredient in the manifestation of what humankind has spent its entirety eloquently christening: Life.

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*Appendix A***Recognition Questionnaire****Name:** _____**Please answer the following the questions.**

- 1 What are your career aspirations?**

- 2 What is most important to you while at work?**

- 3 What do you want others to know about you?**

- 4 What forms of recognition do you value most?**

PLEASE COMPLETE SURVEY BY:**(enter due date)****RETURN TO:****(enter location/person)**

*Appendix B***Healthcare Team Vitality Instrument**

The following questions ask you about your current work environment. Circle the number that most closely indicates the extent to which the item is present in your current job:

Please specify by checking the Respondent Type that most closely matches your position

Registered Nurse

Circle the correct numeric response to each question

Question

Survey Scale: 1=Strongly Disagree 2=Disagree 3=Neutral 4=Agree 5=Strongly Agree

- | | | | | | | |
|----|--|----------|----------|----------|----------|----------|
| 1 | I have easy access to the supplies and equipment I need to do my work on this unit. | 1 | 2 | 3 | 4 | 5 |
| 2 | The support services to this unit respond in a timely way. | 1 | 2 | 3 | 4 | 5 |
| 3 | I can discuss challenging issues with care team members on this unit. | 1 | 2 | 3 | 4 | 5 |
| 4 | My ideas really seem to count on this unit. | 1 | 2 | 3 | 4 | 5 |
| 5 | I speak up if I have a patient safety concern. | 1 | 2 | 3 | 4 | 5 |
| 6 | Care team members on this unit feel free to question the decisions or actions of those with more authority. | 1 | 2 | 3 | 4 | 5 |
| 7 | Important patient care information is exchanged during shift changes. | 1 | 2 | 3 | 4 | 5 |
| 8 | If I have an idea about how to make things better on this unit, the manager and other staff are willing to try it. | 1 | 2 | 3 | 4 | 5 |
| 9 | Care professionals communicate complete patient information during hand-offs. | 1 | 2 | 3 | 4 | 5 |
| 10 | Essential patient care equipment is in good working condition on this unit. | 1 | 2 | 3 | 4 | 5 |

Total:

PLEASE COMPLETE SURVEY BY:

(enter due date)

RETURN TO:

(enter location/person)

Adapted from Robert Wood Johnson Foundation, Transforming Care at the Bedside Initiative (2008), Healthcare Team Vitality Instrument

Appendix C

Frequency Log (SAMPLE) 2012

Name	Above/Beyond Level I	Above/Beyond Level II	Above/Beyond Level III	Loyalty/ Employment	Celebrations
Nurse A				3/18	12/25
Nurse B	6/13				12/25
Nurse C					12/25
Nurse D		1/10			12/25
Nurse E				2/12	12/25
Nurse F					12/25
Nurse G					12/25
Nurse H	11/20				12/25
Nurse I			12/10		12/25
Nurse J					12/25
Nurse K	2/10				12/25
Nurse L			12/20		12/25
Nurse M				6/15	12/25
Nurse N					12/25
Nurse O					12/25
Nurse P				4/20	12/25
Nurse Q					12/25
Nurse R					12/25
Nurse S					12/25
Nurse T					12/25

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